

Fill in this information to identify the case:

Debtor Name **Mendel Paneth**

United State Bankruptcy Court for the  
Eastern District of New York

Case No: **22-41414-NHL**

Check if this is ☐  
an amended filing

## **Monthly Operating Report for LLC Owned by Chapter 13 Debtor**

Month: June 2023

Date report filed: 8/30/2023

Line of business: Personal Services

NAISC Code: \_\_\_\_\_

In accordance with title 28, section 1746 of the United States Code, I declare under penalty of perjury that I have examined the following small business monthly operating report and the accompanying attachments and, to the best of my knowledge, these documents are true, correct, and complete.

Original signature of responsible party \_\_\_\_\_

Printed Name of responsible party Mendel Paneth

### **1. Questionnaire**

Answer all questions on behalf of the debtor for the period covered by this report, unless otherwise indicated.

	Yes	No	N/A
<b><u>If you answer No to any of the questions in lines 1-9 attach an explanation and label it Exhibit A</u></b>			
1. Did the business operate during the entire reporting period?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Do you plan to continue to operate the business next month?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Have you paid all of your bills on time?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Did you pay your employees on time?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5. Have you deposited all the receipts for your business into account ending in <b><u>0076</u></b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Have you timely filed your tax returns and paid all your taxes?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7. Have you timely filed all other required government filings?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
8. Have you timely paid all of your insurance premiums?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b><u>If you answer No to any of the questions in lines 1-9 attach an explanation and label it Exhibit B</u></b>			
9. Do you have any bank accounts open other than the account ending in <b><u>0076</u></b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
10. Have you sold any assets other than inventory?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

11. Have you sold or transferred any assets or provided services to anyone related to Debtor? ☐ ☐ ☒
12. Did any insurance company cancel your policy? ☐ ☐ ☒
13. Did you have any unusual or significant unanticipated expenses? ☐ ☒ ☐
14. Have you borrowed money from anyone or made any payments on your behalf ☐ ☒ ☐
15. Has anyone made an investment in your business? ☐ ☒ ☐
16. Have you paid any bills you owed before you filed bankruptcy? ☐ ☒ ☐
17. Have you allowed any checks to clear the bank that were issued before you filed Bankruptcy? ☐ ☒ ☐

## **2. Summary of Cash Activity for All Accounts**

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18. Total opening balance of all accounts \$-0.95
- This amount must equal what you reported as the cash on hand at the end of the month in the previous month. If this is your first report, report balance the total cash as of the date of the filing of this case.
19. Total cash receipts \$ 29,028.30
20. Total cash disbursements \$28,810.37
21. Net Cash Flow
- Subtract line 19 from line 20 and report the result here +\$ 216.98
- This amount may be different from what you may have calculated as net profit.
22. Cash on hand at end of the month
- Add line 21 + Line 18. Report the result here.
- Report this figure as the cash on hand at the beginning of the month on your next operating report. =\$ 216.98
- This amount may not match your bank account balance because you may have outstanding checks that have not cleared the bank or deposits in transit.

## **3. Unpaid Bills**

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Attach a list of all debts (including taxes) which you have incurred since the day you filed bankruptcy but have not paid. Label it Exhibit C. Include the date the debt was incurred, who is owed the money, the purpose of the debt, and when the debt is due. Report the total from Exhibit C here.

23. Total Payables \$ 0  
(Exhibit C)

#### **4. Money owed to you**

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24. Total Receivables

\$ 0

#### **5. Employees**

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25. What was the number of employees when the case was filed?

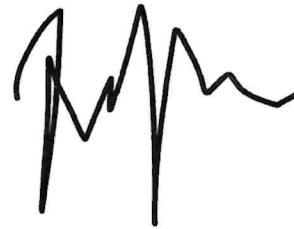
0

26. What is the number of employees as of the date of this monthly report?

0

#### **6. Additional Information**

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A handwritten signature in black ink, consisting of several sharp, angular strokes that form a stylized, somewhat abstract shape.